

NEW \_\_\_\_\_

## APPLICATION FOR PROPERTY TAX ABATEMENT

2009 \_\_\_\_\_

FILED \_\_\_\_\_

WASHINGTON COUNTY CLERK  
197 EAST TABERNACLE  
ST GEORGE, UT 84770  
435-634-5712

REMINDERS \_\_\_\_\_

PROPERTY SERIAL NUMBER \_\_\_\_\_ ACCOUNT NUMBER \_\_\_\_\_

LAST NAME	FIRST NAME	BIRTHDATE	AGE	SOCIAL SECURITY
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SPOUSE'S LAST NAME	FIRST NAME	BIRTHDATE	AGE	SOCIAL SECURITY
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ADDRESS	CITY	STATE	ZIP	TELEPHONE
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Is your home located on property which exceeds one acre or do you use or rent a portion of your home for business...No \_\_\_\_\_ Yes \_\_\_\_\_

**COMPUTATION OF HOUSEHOLD INCOME FOR PRIOR YEAR FOR CIRCUIT BREAKER & COUNTY ABATEMENTS ONLY:**

List yearly income from all sources received by all members of your household in prior year: (59-2-1202)

1. Wages, salaries and other employee compensation.....\$ \_\_\_\_\_
2. Business, farm, partnership, rent, sale of property and miscellaneous income.....\$ \_\_\_\_\_
3. Dividend, interest and trust income.....\$ \_\_\_\_\_
4. Pensions, annuities, capital gains and other retirement (IRA).....\$ \_\_\_\_\_
5. Social Security and Railroad Retirement.....\$ \_\_\_\_\_
6. Welfare, unemployment compensation, alimony and strike benefits.....\$ \_\_\_\_\_
7. Veterans Disability.....\$ \_\_\_\_\_

TOTAL PRIOR YEAR HOUSEHOLD INCOME.....\$ \_\_\_\_\_

**CIRCUIT BREAKER: (COMPLETE HOUSEHOLD INCOME FOR PRIOR YEAR INFORMATION)**

To qualify, answers must be YES to the following (59-2-1201)

1. Age 65 if born by December 31, 1942 OR age 66 if born after January 1, 1943, OR are you a widow or widower? Yes \_\_\_\_\_ No \_\_\_\_\_
2. Was household income for year prior to application less than \$28,732?.....NO \_\_\_\_\_ YES \_\_\_\_\_
3. Will you be a resident of Utah for entire year of application and is this your primary residence?.....NO \_\_\_\_\_ YES \_\_\_\_\_
4. Did you **OWN and OCCUPY** your residence on January 1 of year of application?.....NO \_\_\_\_\_ YES \_\_\_\_\_
5. Did you furnish your own support for year prior to year of application?.....NO \_\_\_\_\_ YES \_\_\_\_\_

**COUNTY ABATEMENT: (COMPLETE HOUSEHOLD INCOME FOR PRIOR YEAR INFORMATION)**

You must answer these questions to determine if you qualify (59-2-1107)

1. I am filing as: \_\_\_\_\_ Age 65 or Older  
     \_\_\_\_\_ **Under 65 and disabled** (attach physician's medical statement)  
     \_\_\_\_\_ **Extreme Hardship** would prevail if not granted (attach explanation)
2. Was your household income less than \$28,732 for the previous year?.....NO \_\_\_\_\_ YES \_\_\_\_\_
3. Do you reside at above address for **ten** months of each year and is this your primary residence?.....NO \_\_\_\_\_ YES \_\_\_\_\_

**VETERANS EXEMPTION:**To qualify, answers must be YES and **DISABILITY PERCENTAGE PROVIDED** (59-2-1104)

1. Were you the owner of record January 1<sup>st</sup> of year of application?.....NO \_\_\_\_\_ YES \_\_\_\_\_
2. Are you a resident of Washington County and is this your primary residence?.....NO \_\_\_\_\_ YES \_\_\_\_\_
3. Indicate service connected disability percentage per Veterans Administration .....% \_\_\_\_\_
4. I am filing as the \_\_\_\_\_ Veteran OR \_\_\_\_\_ **Unmarried** surviving spouse or orphaned minor child or children who qualified for this exemption.

Date	Personal Property	Tax Dollars Granted	Tax Val & Dollar Balance
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**BLIND EXEMPTION:**

To qualify, answers must be YES to the following #1 OR #2 PLUS #3 and #4 (59-2-1106)

1. I have vision no more than 20/200 visual acuity in the better eye when corrected or have a restriction in the field of vision in the better eye which subtends an angle of vision no greater than 20 degrees (certified by ophthalmologist) .... NO \_\_\_\_\_ YES \_\_\_\_\_
2. I am the **Unmarried** surviving spouse or minor orphan of one who qualified.....NO \_\_\_\_\_ YES \_\_\_\_\_
3. Are you a resident of Washington County and is this your primary residence?.....NO \_\_\_\_\_ YES \_\_\_\_\_
4. Were you owner of record January 1 of year of application?.....NO \_\_\_\_\_ YES \_\_\_\_\_

Date	Personal Property	Tax Dollars Granted	Tax Val & Dollar Balance
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**CERTIFICATION AND SIGNATURE:**

I declare that an abatement/exemption is entitled on the above property, and that the information on this form is correct and income entered is total household income received from all taxable and non-taxable sources. I have made no other application for exemption for current year

DATE \_\_\_\_\_

SIGNATURE OF APPLICANT \_\_\_\_\_

SIGNATURE OF APPLICANT'S SPOUSE \_\_\_\_\_

***FILING DEADLINE - SEPTEMBER 1***